

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

STATE BOARD OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

State File No. 36570

FILED DEC 13 1943 318

Registration District No.

Primary Registration District No.

Registrar's No. 10683

1. PLACE OF DEATH:

(a) County St. Louis
(b) City or town St. Louis
(If outside city or town limits, write "RURAL" and name of township)
(c) Name of hospital or institution: Parklane Hospital
(If not in hospital or institution, write street number or location)
(d) Length of stay: In hospital or institution (Specify whether)
In this community years, months or days

3. (a) PRINT FULL NAME MAGDALENA KRATZLY

3. (b) If veteran, name war None 3. (c) Social Security No.

4. Female 5. Color or race white 6. (a) Single, widowed, married Married
6. (b) Name of husband or wife John Kratzly 6. (c) Age of husband or wife if alive 16.5 years
7. Birth date of deceased April 14, 1888
(Month) (Day) (Year)

8. AGE: Years 61 Months 7 Days 18 If less than one day hr. min.

9. Birthplace Gasconade County, MO.
(City, town, or county) (State or foreign country)

10. Usual occupation Housewife

11. Industry or business Lumber Lutes, Altemann
12. Birthplace Gasconade County, MO.
(City, town, or county) (State or foreign country)

14. Maiden name Mary Scholtz Werle

15. Birthplace Gasconade County, MO.
(City, town, or county) (State or foreign country)

Informant John Kratzly

Address 5625 Reber Pl.

(a) burial (b) Date thereof 12-4-43
(Month) (Day) (Year)

(c) Place: burial or cremation Graceland Burial Park

18. (a) Signature of funeral director Greggshauer Mortuaries
(b) Address 4228 So. Greggshauer

19. (a) DEC 13 1943 (b) J. F. Brundage
(Date of local registry) (Registrar's signature)

2. USUAL RESIDENCE OF DECEASED:

(a) State MO. (b) County St. Louis
(c) City or town St. Louis
(If outside city or town limits, write "RURAL")
(d) Street No. 5625 Reber Pl.
(If rural, give location)
(e) Citizen of foreign country? (Yes or No)
If yes, name country.

MEDICAL CERTIFICATION

20. DATE OF DEATH: Month Dec. day 2nd
year 1943 hour 3:30 minute 17 M.

21. I hereby certify that I attended the deceased from Jan 1943
to Dec 2, 1943
that I last saw her alive on 12/1, 1943
and that death occurred on the date and hour stated above.

Immediate cause of death Pneumonia Duration

Due to Arterio-Sclerotic Heart

Due to Heart

Other conditions (Include pregnancy within 3 months of death)

Major findings: Of operations none 93

Of autopsy none PHYSICIAN Underline the cause to which death should be charged statistically.

22. If death was due to external causes, fill in the following: no

(a) Accident, suicide, or homicide (specify)
(b) Date of occurrence
(c) Where did injury occur? (City or town) (County) (State)
(d) Did injury occur in or about home, on farm, in industrial place, in public place?

While at work (Specify type of place) (e) Means of Injury

23. Signature John F. Brundage (M. D. or other)
Address 10683 Reber Pl. Date signed 12/4/43

Dr. Brice
2648 Cadmus Avenue
11-12-13

STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me, or by.....

....., Registered Apprentice No.....
working under my personal supervision.

Signed

Richard W. Housenand

Licensed Embalmer No. *4007*

P. O. Address.....

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license.)

If this body is not embalmed, fact should be so stated above.

My Marriage license of parents
3-6-1899 - Gasconade Co. Mo. Car. Chua
Rev. Fr. Franzenfeld.

Affidavits containing erasures will not be accepted; draw one line through error and write above it.

THE STATE BOARD OF HEALTH OF MISSOURI
BUREAU OF VITAL STATISTICS

State of Mo
County of St. Louis } ss.

State File No. 310570
Local Registrar's No. 10663

AFFIDAVIT FOR CORRECTION OF A RECORD

On this 28 day of June, 1946, before me appears Homer Krattley, who, upon his oath, states that the original record of birth for Margdalena Krattley, died born 12-2, 1913 in the State of Missouri, and which was filed at on, 19 , should be corrected as follows:

Item No. 12 should read Lucius Allemann

Instead of buttes

Item No. 14 should read Mary Therli

Instead of "J" W. herle

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

Item No. should read

Instead of

The above is true to the best of my knowledge, information and belief.

(SEAL) Affiant Homer W. Krattley son Relationship.

5617 Reber Place
Present Address.

Subscribed and sworn to before me this 28 day of June, 1946

My Commission expires 3-4-49 Edna C. Patterson Notary Public.

